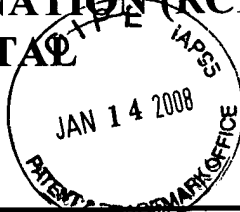


REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



Application Number	10/523,092
Filing Date	April 4, 2005
First Named Inventor	SCHRAMM <i>et al.</i>
Group Art Unit	1797
Examiner Name	Therkorn, Ernest G.
Attorney Docket Number	08146.0005U1

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. Submission required under 37 C.F.R. § 1.114

a. ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.

i. ☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered).

ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

iii. ☐ Other _____

b. ☒ Enclosed

i. ☒ Amendment/Reply 01/15/2008 SSITHIB1 00000010 10523092

ii. ☐ Affidavit(s)/Declaration(s) 01 FC:1801 810.00 OP

iii. ☐ Information Disclosure Statement (IDS)

iv. ☒ Other Return receipt postcard

2. Miscellaneous

a. ☐ Suspension of action on the above-identified application is requested under 37. C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)

b. ☐ Other _____

3. Fees (Fees are required at the time the RCE is filed)

a. ☐ Check in the amount of \$ _____ is enclosed for the fees designated below.

b. ☒ Credit Card Form PTO-2038 authorizing payment in the amount of \$810.00 is enclosed for the fees designated below.

c. ☐ Payment is herewith submitted electronically via EFS-Web in the amount of \$ _____ for the fees designated below.

d. ☐ The Director is hereby authorized to charge the amount of \$ _____ to Deposit Account No. 14-0629 for the fees designated below.

e. ☒ Fees

☒ RCE fee required under 37 C.F.R. § 1.17(e)

☐ Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)

☐ Other _____

f. ☒ The Director is hereby authorized to charge any underpayment or credit any overpayment to Deposit Account No. 14-0629.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	Mitchell A. Katz	Registration No. (Attorney/Agent)	33,919
Signature		Date	January 9, 2008

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

I hereby certify that this correspondence, including any items indicated as attached or included, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.

Name of Person Mailing(Print/Type)	Mitchell A. Katz	Date	January 9, 2008
Signature		Date	January 9, 2008